



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

# CANDIDATE COMMITTEE COVER PAGE

FILED

06 SEP 18 AM 10:33

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers from:

07/24/06

to 08/14/06

CANDIDATE LAST NAME

Candidate Last Name

First Name

M.I.

Vezinau

Cindy

L

4a. Office Sought Including District # or Community Served (if applicable)

Macomb County Commissioner- District 24

4b. County of Residence Macomb

6. Treasurer's Name &amp; Residential Address

Cindy L. Vezinau

33816 Jefferson St. Clair Shores, MI 48082

Area Code &amp; Phone (586) 294-4992

8. Designated Record keeper's Name and Mailing Address (if the committee has a Designated Record keeper)

Mary K. Esler

30763 Roan, Warren MI 48093

Area Code and Phone (586) 558-8315

Area Code and Phone

## 9. TYPE OF STATEMENT

9a. ☐

Pre-Election

OR

9b. ☒

Post-Election

Pre-Election or Post-Election Statement relates to:



Primary



General



Convention



School



Special



Caucus

Date of Election, Convention or Caucus

08/08/06

9c. Annual Statement ( \_\_\_\_\_ Coverage Year)

9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e. Dissolution of Candidate Committee

Effective Date of Dissolution

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Designated Record keeper

Type or Print Name

Signature

Date

08/14/06

Candidate

Cindy L. Vezinau

Type or Print Name

Signature

Date

08/14/06

Authority granted under P.A. 388 of 1976



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 137733

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Cindy Vezinau

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>190.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>190.00</u>	(18.) \$ <u>\$2,875.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$190.00</u>	(20.) \$ <u>\$2,875.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$1,362.61</u>	(21.) \$ <u>\$3,458.93</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$429.00</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$429.00</u>	(23.) \$ <u>\$1,958.50</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)</b>		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$951.36</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$1,155.50</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$190.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$1,345.50</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$429.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$916.50</u>	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_

2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report all contributions regardless of amount.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt 07/31/06

Name & Address:

Joyce Janicki  
22493 Milner St. Clair Shores, MI 48081

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 07/31/06

Name & Address:

Cadillac Travel Inc.  
3000 Town Center, Ste. 22  
Southfield, MI 48075

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt 08/03/06

Name & Address:

Patrice Palermino  
20936 Walton St. Clair Shores, MI 48081

\$ 40.00

\$ 40.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt \_\_\_\_\_

Name & Address:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

\$ 190.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3 of Summary  
Page.

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# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-K

1. Committee I. D. Number **137733**

2. Committee Name **Committee to Elect Cindy Vezinau**

### CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>Mel Joseph</b> <b>22556 Gratiot, Eastpointe MI 48021</b>  If over \$100.00 cumulative, please provide: Occupation: <b>General Manager</b> Employer Name & Business Address: <b>Kern-Teo Land Surveyors</b> <b>22556 Gratiot, Eastpointe MI 48021</b>  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <b>Yard Signs</b> 5. Date Of Receipt: <b>08/02/06</b> 6. Vendor Name & Address: <b>Sawicki and Son</b> <b>1521 W. Lafayette, Detroit, MI 48216</b>  Click for Memo Itemization Type	\$ <b>411.25</b>	\$ <b>441.25</b>
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>Cindy L. Vezinau</b> <b>33816 Jefferson</b> <b>St. Clair Shores, MI 48082</b>  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <b>Refreshments for Walking Campaign</b> 5. Date Of Receipt: <b>07/31/06</b> 6. Vendor Name & Address: <b>Nautical Liquor</b> <b>27300 Harper St. Clair Shores MI 48081</b>  Click for Memo Itemization Type	\$ <b>13.16</b>	\$ <b>1894.48</b>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>Cindy L. Vezinau</b> <b>33816 Jefferson</b> <b>St. Clair Shores, MI 48082</b>  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <b>Postage for Postcards</b> 5. Date Of Receipt: <b>08/01/06</b> 6. Vendor Name & Address: <b>Postmaster Eastpointe MI 48021</b>  Click for Memo Itemization Type	\$ <b>336</b>	\$ <b>2230.48</b>
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$760.41**

Grand Total of all Schedules 1-K  
(Complete on last page of Schedule)

Enter this total  
on line 6 of  
Summary  
Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

## ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-K

1. Committee I. D. Number 137733

## CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Cindy Vezinau

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: MLT Vacations Home Office: 33816 Jefferson St. Clair Shores, MI 48082 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Postage</u> 5. Date Of Receipt: <u>08/01/06</u> 6. Vendor Name & Address: St. Clair Shores Post Master 48080 Click for Memo Itemization Type	\$ 144	\$ 2374.48
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: MLT Vacations Home Office: 33816 Jefferson St. Clair Shores, MI 48082 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Postage</u> 5. Date Of Receipt: <u>08/01/06</u> 6. Vendor Name & Address: Postmaster St. Clair Shores 48080 Click for Memo Itemization Type	\$ 96	\$ 2470.48
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Printing</u> 5. Date Of Receipt: <u>08/02/06</u> 6. Vendor Name & Address: Kinkos Roseville 31980 Gratiot Click for Memo Itemization Type	\$ 6.53	\$ 2477.01

Page Subtotal **\$246.53**Grand Total of all Schedules 1-K  
(Complete on last page of Schedule)Enter this total  
on line 6 of  
Summary  
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 13733

2. Committee Name Committee to Elect Cindy Vezinau

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in item 5)
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Contribution #1 Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Walking Campaign Materials</u> 5. Date Of Receipt: <u>08/02/06</u> 6. Vendor Name & Address: Walgreens 32201 Harper Ave. SCS MI	\$ 10.76	\$ 2487.76
<input type="checkbox"/> Fund Raiser Contribution			

Contribution #2 Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Postage</u> 5. Date Of Receipt: <u>08/02/06</u> 6. Vendor Name & Address: Anchorville Post Office 48004	\$ 72	\$ 2559.76
<input type="checkbox"/> Fund Raiser Contribution			

Contribution #3 Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Mailing Labels</u> 5. Date Of Receipt: <u>08/02/06</u> 6. Vendor Name & Address: City of St. Clair Shores	\$ 61.24	\$ 2621
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$144.00**

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule)

Enter this total  
on line 6 of  
Summary  
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-K

1. Committee I. D. Number 13733

2. Committee Name Committee to Elect Cindy Vezinau

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Handouts</u> 5. Date Of Receipt: <u>08/02/06</u> 6. Vendor Name & Address: Kinkos Roseville 31980 Gratiot	\$ <u>16.20</u>	\$ <u>2637.20</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>CABA Postcards</u> 5. Date Of Receipt: <u>08/02/06</u> 6. Vendor Name & Address: Kinkos Roseville 31980 Gratiot	\$ <u>73.39</u>	\$ <u>2710.59</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Flyers</u> 5. Date Of Receipt: <u>08/02/06</u> 6. Vendor Name & Address: Kinkos Roseville 31980 Gratiot	\$ <u>7.12</u>	\$ <u>2717.71</u>
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$96.71**

Grand Total of all Schedules 1-K  
(Complete on last page of Schedule)

Enter this total  
on line 6 of  
Summary  
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BUREAU OF ELECTIONS

## ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number 137733

## CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Cindy Vezinau

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in item 5)
Contribution #1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Printing</u> 5. Date Of Receipt: <u>08/04/06</u> 6. Vendor Name & Address: Kinkos 31980 Gratiot Roseville	\$ <u>42.86</u>	\$ <u>2760.57</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Voter Labels</u> 5. Date Of Receipt: <u>08/04/06</u> 6. Vendor Name & Address: City of St. Clair Shores	\$ <u>1.70</u>	\$ <u>2762.27</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Snacks/Bottled Water for Poll Watchers</u> 5. Date Of Receipt: <u>08/07/06</u> 6. Vendor Name & Address: Sam's Club Roseville	\$ <u>49.40</u>	\$ <u>2811.67</u>
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$93.96**Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule)Enter this total  
on line 6 of  
Summary  
Page





**ITEMIZED IN-KIND CONTRIBUTIONS**  
**SCHEDULE 1-IK**

1. Committee I. D. Number 137733

2. Committee Name Committee to Elect Cindy Vezinau

**CANDIDATE COMMITTEE**

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in item 5)
Contribution #1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Lunch for Poll Watchers</u> 5. Date Of Receipt: <u>08/08/06</u> 6. Vendor Name & Address: The Galley Jefferson Circle- SCS City Hall	\$ <u>21</u>	\$ <u>2832.67</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address:  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	\$ _____
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address:  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	\$ _____
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$21.00**

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule) **\$1,362.61**

Enter this total  
on line 6 of  
Summary  
Page



ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number **137733**  
2. Committee Name **Committee to Elect Cindy Vezinau**

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name: <b>Mary K. Esler</b> Address: <b>30763 Roan Warren MI 48093</b> <input type="checkbox"/> Fund Raiser	Purpose: <b>Campaign Manager</b> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>08/04/06</b> Date	<b>\$ 429</b>
Expenditure #2 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **\$429.00**

Grand Total of all Schedules 1B  
(Complete on last page of Schedule)

Enter this total  
on line 8a of  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number

**137733**

Committee to Elect Cindy Vezinau

2. Committee Name

This Schedule itemizes:

- a. Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Indicate type and you may assign an expenditure code) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082  If bank loan, name of endorser or guarantor:	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 07/31/06 6. <u>Original Amount of Debt:</u> \$ 13.16	\$ \$ \$ \$ \$	\$	\$ 13.16 <input type="checkbox"/> FORGIVEN
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082  If bank loan, name of endorser or guarantor:	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/01/06 6. <u>Original Amount of Debt:</u> \$ 336.00	\$ \$ \$ \$ \$	\$	\$ 336.00 <input type="checkbox"/> FORGIVEN
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082  If bank loan, name of endorser or guarantor:	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/01/06 6. <u>Original Amount of Debt:</u> \$ 144	\$ \$ \$ \$ \$	\$	\$ 144.00 <input type="checkbox"/> FORGIVEN

Page Subtotal (Outstanding debt)

**\$493.16**

Grand Total of all Schedules 1E

(Complete on last page of Schedule showing amounts owed by or to the committee)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Page 9 of 13

Enter this total  
on line 12a  
"owed by" or  
line 12b "owed  
to" of the  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number

**137733**

Committee to Elect Cindy Vezinau

2. Committee Name

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Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by:  Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/01/06 6. <u>Original Amount of Debt:</u> \$ 96.00	\$ \$ \$ \$ \$	\$	\$ 96.00  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:  Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/01/06 6. <u>Original Amount of Debt:</u> \$ 6.53	\$ \$ \$ \$ \$	\$	\$ 6.53  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:  Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/02/06 6. <u>Original Amount of Debt:</u> \$ 10.76	\$ \$ \$ \$ \$	\$	\$ 10.76  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$				

Page Subtotal (Outstanding debt)

**\$113.29**

Grand Total of all Schedules 1E

(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total  
on line 12a  
"owed by" or  
line 12b "owed  
to" of the  
Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number

**137733**

Committee to Elect Cindy Vezinau

2. Committee Name

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Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by:  Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/02/06 6. <u>Original Amount of Debt:</u> \$ 72.00	\$ \$ \$ \$ \$	\$	\$ 72.00  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:  Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/02/06 6. <u>Original Amount of Debt:</u> \$ 61.24	\$ \$ \$ \$ \$	\$	\$ 61.24  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:  Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/02/06 6. <u>Original Amount of Debt:</u> \$ 16.20	\$ \$ \$ \$ \$	\$	\$ 16.20  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$				

Page Subtotal (Outstanding debt)

**\$149.44**

Grand Total of all Schedules 1E

(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total  
on line 12a  
"owed by" or  
line 12b "owed  
to" of the  
Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number

**137733**

Committee to Elect Cindy Vezinau

2. Committee Name

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Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/02/06 6. <u>Original Amount of Debt:</u> \$ 73.39	\$ \$ \$ \$ \$	\$	\$ 73.39 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/02/06 6. <u>Original Amount of Debt:</u> \$ 7.12	\$ \$ \$ \$ \$	\$	7.12 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Cindy L. Vezinau 33816 Jefferson St. Clair Shores, MI 48082	4. Type: <u>Loan</u>  5. <u>Date Debt Was Incurred:</u> 08/04/06 6. <u>Original Amount of Debt:</u> \$ 42.86	\$ \$ \$ \$ \$	\$	\$ 42.86 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$				

Page Subtotal (Outstanding debt)

**\$123.37**

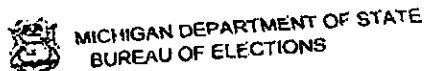
Grand Total of all Schedules 1E

(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

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# DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE

137733

1. Committee I.D. Number

Committee to Elect Cindy Vezinau

2. Committee Name

This Schedule itemizes:

- a. Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee.  
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Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantor, if any.

4. Type of Obligation (Indicate type and you may assign an expenditure code)

5. Indicate date debt was incurred

6. Indicate original amount of debt

7. Date and amount of each payment

8. Cumulative payment to date on debt

9. Outstanding Balance at close of this period (Item 6 minus Item 8)

Debt #1 Corp? ☐ Yes  
Owed to or by:Cindy L. Vezinau  
33816 Jefferson  
St. Clair Shores, MI 48082

4. Type: Loan

5. Date Debt Was Incurred:  
08/04/066. Original Amount of Debt:  
\$ 1.70

\$

\$

\$

\$

\$

\$

\$ 1.70

☐ FORGIVEN

Amount Endorsed: \$

If bank loan, name of endorser or guarantor:

Debt #2 Corp? ☐ Yes  
Owed to or by:Cindy L. Vezinau  
33816 Jefferson  
St. Clair Shores, MI 48082

4. Type: Loan

5. Date Debt Was Incurred:  
08/02/066. Original Amount of Debt:  
\$ 49.40

\$

\$

\$

\$

\$

\$

\$ 49.40

☐ FORGIVEN

Amount Endorsed: \$

If bank loan, name of endorser or guarantor:

Debt #3 Corp? ☐ Yes  
Owed to or by:Cindy L. Vezinau  
33010 Jefferson  
ST. CLAIR SHORES, MI 48082

4. Type: Loan

5. Date Debt Was Incurred:  
08/02/066. Original Amount of Debt:  
\$ 21

\$

\$

\$

\$

\$

\$

\$ 21.00

☐ FORGIVEN

Amount Endorsed: \$

If bank loan, name of endorser or guarantor:

Page Subtotal (Outstanding debt)

\$72.10

Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee)

\$951.36

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

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